**Introduction**
Prior to site and service endorsement, business verification must take place. During the process of business verification, the provider organization submits a self study of the core rules (10A NCAC 27G .0201-.0204) verifying that they have met all the requirements therein. (The provider is not required to submit this if nationally accredited, licensed with DFS or has had a compliance review from NC Council of Community Programs within the past three years.) The documents created in adherence with the core rules should be utilized as evidence of provider compliance where noted in the check sheet and instructions.
The following set of instructions is to serve as general guidelines to facilitate the review of providers for endorsement. Service definitions, core rules (as noted above), staff definitions (10A NCAC 27G .104) and other DHHS communications (e.g. Service Records Manual, Communication Bulletins, Implementation Updates and other publications) should be used to support the reviewer's determination of compliance. In addition, the Business Entity Type Reference document (attached) assists to clarify the requirements for different business entities such as corporations, partnerships and limited liability corporations and partnerships.

**Provider Requirements**
In this section, the provider is reviewed to ascertain that requirements are met in order for services to be provided. The provision of services is addressed later in this endorsement process.

**1.a-d** Review identified documents for evidence that provider meets DMH/DD/SAS and/or DMA standards as related to administration responsibilities, financial oversight, clinical services and quality improvement. These standards include, but are not limited to, policies and procedures (contents of which are mandated in 10A NCAC 27G .0201 – Governing Body Policies) and the key documents required by law for the formation of the business entity (refer to attachment titled Business Entity Type).

Meet the provider qualification policies, procedures, and standards established by the Division of Medical Assistance (DMA); Review DMA enrollment document to verify provider's date of enrollment

Review documentation that demonstrates provider is a legal US business entity. Documentation should indicate the business entity is currently registered with the local municipality **or** the office of the NC Secretary of State, that the information registered with the local municipality **or** the Secretary of State is current, and that there are no dissolution, revocation or revenue suspension findings currently attached to the provider entity. Also review corporate documentation demonstrating registration to operate a business in NC. Information for corporate entities may be verified on the web site for the Secretary of State (refer to key documents section of attachment titled Business Entity Type).

Review the documentation that demonstrates the provider has been accredited by a designated accreditation agency. Evidence of formal application to a DMH-DD-SAS accepted National Accreditation body (prior to Nov. 1, 2009) or Certificate of National Accreditation (by Nov. 1, 2009 or 1 yr post provider enrollment date)

- Has the provider attained National Accreditation? If so review the actual Accreditation Document.
- If not, what is the provider plan to attain National Accreditation? Review for evidence that the provider has selected an Accrediting agency or has evidence of official intent with an Accrediting agency

2. Staffing Requirements

2.a-h     In this section, the reviewer is primarily concerned with the hiring practices of the provider and ensuring that all employees in place are equipped with the education, training and experience to work with the population served in the capacity and at the Level of intervention for which they were hired. Staff providing the service of Supported Employment must meet general and requirements in 10A NCAC 27G .0100-.0200.

Review personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met based on paraprofessional standards. Review the job description for paraprofessionals and review the program description and personnel manual to determine the role and responsibilities of such staff and the expectation regarding supervision. Staff must meet client specific competencies as identified by the participant's person-centered planning team and documented in the Person Centered Plan/Plan of Care. Review the following for each professional:

- Employment application
- Resume, and
- Other documentation for evidence of at least a GED or high school diploma. Existing staff must have documentation of either High School diploma/GED or b) they will have 18 months to obtain their GED upon implementation of the waiver. All new staff (hired post implementation) must have proof of High School Diploma or GED upon hire at implementation of the waiver
- Client Specific Competencies Trainings
- Staff must successfully complete First Aid, CPR and DMH/DD/SAS Core Competencies and required refresher training

Each paraprofessional must have an individualized supervision plan that is carried out by an appropriate Qualified Professional or an Associate Professional. Review supervision plans to ensure that each paraprofessional is receiving supervision and review notes, schedule and other supporting documentation that demonstrate on-going supervision by the assigned Qualified Professional or an Associate Professional. In addition, each employee's personnel record is to have a copy of:

- Documentation verifying criminal record check
- Healthcare registry check
- Driving record must be checked if providing transportation, copy of driving record. Have a North Carolina or other valid driver's license.

- Have an acceptable level of automobile liability insurance (copy of insurance and registration)

## 3. Service Type/Setting

Supported Employment (individual) is conducted in a variety of settings, particularly work sites in which person's without disabilities are employed.
Supported Employment (group) is conducted in Transitional Work Services settings. Transitions Work Services consist of supporting participants in transition to integrated, competitive employment through work that occurs in a location other than a licensed facility. Transitions work service options include, but are not limited to:

- Mobile work force
- Work station in industry
- Affirmative industry
- Enclave

## 4. **Program/Clinical Requirements**

The elements in this section pertain to the provider's having an understanding of array and service delivery of Supported Employment Services:

**4. a-f**   Review program description which should include verification that supervision is provided as needed and according to the requirements per the participant's Person Centered Plan/Plan of Care.  Supported Employment includes activities needed to sustain paid work by participants receiving waiver services, including supervision and training; services consist of paid employment for persons for whom competitive employment at or able the minimum wage is unlikely and who, because of their disabilities, need intensive on going support to perform in a work setting. This does not prohibit a participant in any way from being paid at or above minimum wage. When supported employment services are provided at a work site in which persons without disabilities are employed, payment will be made for only the adaptations, supervision and training required by participants receiving waiver services as a result of their disabilities, and will not include payment for the supervisory activities rendered as a normal part of the business setting. Supported employment services furnished under the waiver are not available under a program funded by either the Rehabilitation Act of 1973 or P. L. 91- 142. Documentation that states that service is not otherwise available under the Rehabilitation Act of 1973 or P.L. 91-142.

Transportation will be provided between the participant's place of residence and the site of the supported employment sites (in cases where the participant receives supported employment services in more than one place) as a component of services. The cost of transportation is included in the rate paid to providers.

## 5. Service Limitations:

Federal Financial Participation (FFP) can not be claimed for incentive payments, subsidies, or unrelated vocational training expenses such as the following:

- Incentive payments made to an employer to encourage or subsidize the employer's participation in a supported employment program;
- Payments that are passed through to users of supported employment programs; or
- Payments for training that are not directly related to a participant's supported employment program.
- This service is not available at the same time of day as Day Supports, Home and Community Supports, Respite or one of the State Plan Medicaid services that works directly with the participant.

Review the participant's Person Centered Plan/Plan of Care and service notes to verify that the programming is consistent with individual needs (as indicated in the Person Centered Plan/Plan of Care).

## 6. Documentation Requirements
Supported Employment is documented by the use of a grid.   The grid will identify the goal(s) being addressed and contains an accompanying key which specifies the intervention/activity provided. The grid also reflects the assessment of participant's progress toward goal(s) during that episode of care.

A grid shall include:
- the full date the service was provided (month/day/year);
- the goals that are being addressed;
- a number or letter as specified in the key which reflects the intervention/activity;
- a number or letter as specified in the key which reflects the assessment of the participant's progress toward goals;
- duration, when required; and
- initials of the individual providing the service. The initials shall correspond to a signature on the signature log section of the grid.

Review the provider's Policy and Procedure Manual to verify that documentation requirements are consistent with requirements noted above. Refer to the Records Management and Documentation Manual for service notes to verify that documentation is consistent with requirements.